APPLICATION DATA SHEET

Electronic Version v14 Stylesheet Version v14.0

> Title of Invention

MEDICAL DEVICES AND PROCESSES FOR PREPARING SAME

Application Type:

regular, utility

Attorney Docket Number: S63.2-10856-US01

Correspondence address:

Customer Number:

490

490

Inventors Information:

Inventor 1:

Applicant Authority Type:

Inventor

Citizenship:

NL

Given Name:

Jan

Family Name:

Weber

City of Residence:

Maple Grove

State of Residence:

MN

Country of Residence:

US

Address-1 of Mailing Address: 18122 89th Place North

Address-2 of Mailing Address:

City of Mailing Address:

Maple Grove

State of Mailing Address:

Postal Code of Mailing Address: 55311

Country of Mailing Address:

US

Phone:

Fax:

E-mail:

Inventor 2:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name:

Scott

Family Name:

Schewe

City of Residence:

Eden Prairie

State of Residence:

MN

Country of Residence:

US

Address-1 of Mailing Address: 6300 Duck Lake Road

Address-2 of Mailing Address:

City of Mailing Address:

Eden Prairie

State of Mailing Address:

MN

Postal Code of Mailing Address: 55346

Country of Mailing Address:

US

Phone:

Fax:

E-mail:

Inventor 3:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name:

Robert

Middle Name:

E.

Family Name:

Burgmeier

City of Residence:

Plymouth

State of Residence:

MN

Country of Residence:

US

Address-1 of Mailing Address: 2740 Garland Lane North

Address-2 of Mailing Address:

City of Mailing Address:

Plymouth

E-mail:

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State of Mailing Address:	MN				
Postal Code of Mailing Address	: 55447		:		
Country of Mailing Address:	US				*
Phone:					
Fax:					
E-mail:					
Attorney Information:				· · · · · · · · · · · · · · · · · · ·	
Name		Regis	tration Nu	mber	
Mr. Walter I Steinleraus			29592		
Mr. Walter J. Steinkraus			29394		
			29392		
Assignee 1:	Scimed Life	Systems, Inc.			
Assignee 1: Organization Name:		e Systems, Inc.			
Assignee 1:		•			
Assignee 1: Organization Name: Address-1 of Mailing Address:		d Place			
Assignee 1: Organization Name: Address-1 of Mailing Address: Address-2 of Mailing Address:	One Scime	d Place			
Assignee 1: Organization Name: Address-1 of Mailing Address: Address-2 of Mailing Address: City of Mailing Address:	One Scime Maple Grov MN	d Place			
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